

**OFFICE OF ADMINISTRATIVE HEARINGS**

State of California

**GENERAL JURISDICTION DIVISION**

2349 Gateway Oaks Drive, Suite 200, Sacramento, CA 95833  
(916) 263-0550 phone / (916) 376-0554 fax  
[www.dgs.ca.gov/OAH](http://www.dgs.ca.gov/OAH)

Department of General Services

Governor Edmund G. Brown Jr.

**Date****Arbitrator and Hearing Proceeding Selection Form  
Candidate Statement Arbitration**

OAH Case Number:

Agency
California Public Employees' Retirement System (CalPERS) - Arbitrations Christina Nutley, Board Election Manager Operations Support Services Division 400 Q Street Sacramento, CA 95814

Candidate	Protestant

This form is submitted by (Name of Party): \_\_\_\_\_

Submitting Party's Position in this case: ☐ Candidate ☐ Protestant

Parties:

You have seven (7) days from the date of this notice to strike names from the list of arbitrators. A short professional profile is included for your convenience. If, after seven days have passed, OAH does not receive this selection form back (by EMAIL at [sacfilings@dgs.ca.gov](mailto:sacfilings@dgs.ca.gov), or by fax at 916-376-6349) with strikeouts, OAH may select an arbitrator from the names not stricken by other parties. In the event that all names are stricken, the Director of OAH, or her designee, shall appoint an arbitrator.

**Regional Offices**

**Los Angeles**  
320 West Fourth Street  
Suite 630  
Los Angeles, CA 90013  
(213) 576-7200  
(916) 376-6324 fax

**Oakland**  
1515 Clay Street  
Suite 206  
Oakland, CA 94612  
(510) 622-2722  
(916) 376-6323 fax

**San Diego**  
1350 Front Street  
Suite 6022  
San Diego, CA 92101  
(619) 525-4475  
(916) 376-6325 fax

**Van Nuys**  
15350 Sherman Way  
Suite 300  
Van Nuys, CA 91406  
(818) 904-2383  
(916) 376-6319 fax

1.  
(ALJ Bio)

2.  
(ALJ Bio)

3.  
(ALJ Bio)

**Hearing Proceeding:** The parties may select the hearing proceeding they prefer below. Please note that, pursuant to California Code of Regulations, title 2, section 554.4, subdivision (e)(6), each candidate participating in the arbitration shall bear its own expenses in connection with the preparation and presentation of his or her case at the arbitration proceedings. The fees and expenses of the arbitrator and all other expenses of the arbitration shall be borne equally by each candidate participating in the arbitration.

- ☐ By checking this box, I am requesting an in-person oral hearing.
- ☐ By checking this box, I am requesting a telephonic oral hearing.
- ☐ By checking this box, I am waiving an oral hearing. I understand that if all parties waive an oral hearing, we agree that this matter may be decided by the arbitrator based on the documents submitted.

### **Preferred Method of Service**

In order to quickly resolve this matter, I prefer and give consent that all future correspondence regarding this matter be sent to me via

- ☐ Email, at my email address: \_\_\_\_\_
- ☐ Fax, at my fax number: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date